

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS           | ID NO. | DATE     |
|---------------------------|--------------------|--------|----------|
| FEE DETERMINATION         | <i>[Signature]</i> |        | 08/19/01 |
| O.I.P.E. CLASSIFIER       | <i>[Signature]</i> | 45     | 3/12     |
| FORMALITY REVIEW          | C.V.               | 76603  | 05/01/01 |
| RESPONSE FORMALITY REVIEW |                    |        |          |

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

| Claim          | Date     |
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| Final Original |          |
| 1              | 08/19/01 |
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| Claim          | Date |
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| Claim          | Date |
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If more than 150 claims or 10 actions  
 staple additional sheet here

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